#### FORM-D

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## 1375613



#### FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR INIFORM LIMITED OFFERING EXEMPTION

,	SEC US	E ONLY	
Prefix		Serial	
	DATER	ECEIVED	
	1	1	

UNIFORM LIMITED OFFERING EXEMPTION
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Private Placement of Limited Partnership Interests of TWM Floating Rate Fund, L.P.
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE
Type of Filing: New Filing 🗵 Amendment
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer (L) check if this is an amendment and name has changed, and indicate change.)  TWM Floating Rate Fund, L.P.
Address of Executive Offices (No. and Street, City, State, Zip Code) Telephone Number (Including Archiester)
5500 Preston Road, Suite 250, Dallas, Texas 75205 (214)1252-3250
Address of Principal Business Operations (No. and Street, City, State, Zip Code)  (if different from Executive Offices)  Telephone Number (Including Area Code)
Brief Description of Business
Investment Partnership
Type of Business Organization
Corporation Imited partnership, already formed other (please specify):
business trust LI limited partnership, to be formed
Actual or Estimated Date of Incorporation or Organization:    Month   Year
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: TX
CN for Canada; FN for other foreign jurisdiction)  JAN 2 2 2007
GENERAL INSTRUCTIONS IHOMSON
Financial: Financial
18 Mount File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230,501 et seq. or 15 U.S.C. 77d(6).  When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is decined filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is
received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.
Where To File: U.S. Securities and Exchange Commission, 450 Fish Street, N.W., Washington, D.C. 20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed of printed signatures.
Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filled with the SEC.
Filing Fee: There is no federal filing fee.
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.  ATTENTION
Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file
the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is
predicated on the filing of a federal notice.
Patential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.  SEC 1972 (2.97)

_			A. BASIC IDENTIFI	CATION DATA		
2.	Enter the information i	requested for the fo	llowing:			
х	Each promoter of the i	ssuer, if the issuer l	has been organized within the pa	ast five years:		
X	Each beneficial owner	having the power t	to vote or dispose, or direct the	vote or disposition of, 10% or	r more of a class o	f equity securities of the
	issuer;		·			
X			porate issuers and of corporate	general and managing partner	s of partnership is	suers; and
<u>X</u>	Each general and man			- · · · · · · · · · · · · · · · · · · ·		ы
	eck Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	☐ Director	☑ General and/or Managing Partner
<u>T1</u>	l Name (Last name first, G GP Management, In	c., General Partne				
	siness or Residence Add 10 Preston Road, Suite				· ·	
Ch	eck Box(es) that Apply:	Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	General and/or Managing Partner
	l Name (Last name first, lleson, John C., Preside					
Bu	siness or Residence Add	ress (Number and S	Street, City, State, Zip Code)			
_	00 Preston Road, Suite			(5)		
	eck Box(es) that Apply:		☐ Beneficial Owner	⊠ Executive Officer	☐ Director	☐ General and/or Managing Partner
	Name (Last name first,		ant Carnetam			
	nnett, Eric W., Vice Pro		Street, City, State, Zip Code)			·· <del>······</del>
	00 Preston Road, Suite					
	eck Box(es) that Apply:	Promoter	☐ Beneficial Owner	⊠ Executive Officer	Director	General and/or Managing Partner
	Name (Last name first,					· · · · · · · · · · · · · · · · · · ·
	rry, Samuel C., Contro					
	siness or Résidence Add 10 Preston Road, Suite		Street, City, State, Zip Code)			
	eck Box(es) that Apply:		☐ Beneficial Owner	Executive Officer	☐ Director	General and/or
_		10: 11: 1				Managing Partner
Fu	Il Name (Last name first	, if individual)				
Bu	siness or Residence Add	ress (Number and :	Street, City, State, Zip Code)			
Ch	eck Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Fu	Il Name (Last name first	, if individual)				
Bu	siness or Residence Add	ress (Number and	Street, City, State, Zip Code)		<del></del>	
Ch	eck Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Fu	Il Name (Last name first	, if individual)			<del>, , , , , , , , , , , , , , , , , , , </del>	<u></u>
Bu	siness or Residence Add	ress (Number and	Street, City, State, Zip Code)			· · · · · · · · · · · · · · · · · · ·

B. INFORMATION ABOUT OFFERING														
1. 1	Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, if filing under ULOE.											Yes .	No ⊠	
2.	. What is the minimum investment that will be accepted from any individual?											\$ <u>100</u>	.000.00	
3. I	Does the offering permit joint ownership of a single unit:										Yes ⊠	No ∏		
	Enter the information requested for each person who has been or will be paid or given, directly or													
indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales														
of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five													•	
f	(5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Full N	Full Name (Last name first, if individual)													
Busin	ess or Re	sidence A	Address	(Numbe	r and Str	eet, Cit	y, State,	Zip Cod	le)					
Name	of Assoc	iated Bro	oker or E	)ealer		·								
	in Which				-									411.5
-					-							(15)		All States
[AL		[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	(CT) [ME]	(DE) [MD]	(DC) [MA]	(FL) [MI]	[GA] [MN]	[HI] [MS]	(ID) (MO)		
(IL) [MT		[NV]	[NH]	[KN]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]		[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[Wi]	[WY]	(PR)		
	lame (Las						[.,,,]	[]	[,,,,]	()		1)	<del></del>	
	ess or Re					eet. Cit	v. State.	Zip Coo	le)			<u></u> -		
										,			_	
	of Assoc					-			<u>-</u> .					
	in Which											***************************************	П	All States
(Cliec		(AZ)	[AR]	(CA)	[CO]	(CT)	(DE)	[DC]	(FL)	[GA]	(HI)	[ID]		7 (ii) Blaces
(IL)		[1A]	(KS)	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT		(NV)	(NH)	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	(SC)	(SD)	[NT]	[XX]	[UT]	[VT]	[VA]	{WA}	[WV]	[WI]	[WY]	[PR]		
Full 1	Vame (Las	st name f	irst, if in	dividua	1)		-							
Busir	ess or Re	sidence /	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Coo	ie)		·'w	•		•
Name	of Assoc	iated Br	oker or I	Dealer						<del></del>				
	in Which											,	П	All States
(Circ	ik iku ali	aics Of (	HECK IN	TIAIGRAI	States).	************	••••••		••••••					, (10.103
(AL	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	(HI]	(ID)		
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	(MI)	[MN]	[MS]	[MO]		
[MT	] [NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	(TN)	(TX)	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	(WY)	[PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

#### 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box p and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Amount Already Aggregate Offering Price Sold Debt Equity ...... 0 ☐ Common ☐ Preferred Convertible Securities (including warrants)..... \$\_5,510,515.48 Partnership Interests..... 5,510,515.48 Other (Specify \_ )...... 0 Total ..... \$\_5,510,515,48 5,510,515.48 Answer also in Appendix, Column 3, if filing under ULOE 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero." Number Aggregate Investors Dollar Amount of Purchases Accredited Investors 10 5.510,515.48 Non-accredited Investors 0 Total (for filings under Rule 504 only) N/A N/A Answer also in Appendix, Column 4, if filing under ULOE 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Type of Dollar Amount Security Sold Rule 505 N/A N/A Regulation A..... N/A N/A Rule 504..... N/A N/A Total ..... N/A N/A 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees.... П Printing and Engraving Costs Legal Fees. 10,000 Accounting Fees Engineering Fees Sales Commissions (specify finder's fees separately) Other Expenses (identify) n Total ...... 10,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	b. Enter the difference between the aggregate offering price g and total expenses furnished in response to Part C-Question 4. proceeds to the issuer."	iven in respon a. This differ	ise to Part C-Que ence is the "adjus	stion 1 sted gross		OCEED	\$ <u>5,500,515,48</u>
5.	Indicate below the amount of the adjusted gross proceeds to the each of the purposes shown. If the amount for any purpose is check the box to the left of the estimate. The total of the paym proceeds to the issuer set forth in response to Part C-Question	not known, fi nents listed m	rnish an estimate	and			
					Ó: Dire	ments to fficers, ectors, & filiates	Payments To Others
	Salaries and fees				\$		\$
	Purchase of real estate				\$		\$
	Purchase, rental or leasing and installation of machinery	and equipme	nt		<b>s</b>		<b>s</b>
	Construction or leasing of plant buildings and facilities.				\$		\$
	Acquisition of other businesses (including the value of s may be used in exchange for the assets or securities of a	securities invo mother issuer	lved in this offer pursuant to a me	ing that ger) 🏻	s		\$
	Repayment of indebtedness		••••••		<b>s</b>	o	\$
	Working capital		*************		<b>s</b>		\$
	Other (specify) (investments)				\$		\$_5,500,515.48
	Column Totals	•••••			\$	⊠	\$_5,500,515,48
	Total Payments Listed (column totals added)		(114444444)	•••••••		\$ <u>' 5,5</u>	500,515.48
	D. FEDE	RAL SIG	NATURE	····			
ign	issuer has duly caused this notice to be signed by the undersigner lature constitutes an undertaking by the issuer to furnish to the U immation furnished by the issuer to any non-accredited investor p	I.S. Securities	and Exchange Co	ommission, I	filed un	der Rule 50 itten reque	O5, the following st of its staff, the
lss	suer (Print or Type) Signature	1-	$\Omega$	Date			
T۱	WM Floating Rate Fund, L.P.	$// \subset$	Ken	January_	<u>ll</u> , 20	07	
Na	ame of Signer (Print or Type) Title of Signer (I	Print or Type	0				
Sa	amuel C. Perry Controller and A	Assistant Secr	tary of TTG GP	Managemen	t, Inc., (	General Pai	tner
	<u>,                                    </u>	ATTENTIO	N				
	Intentional micetatements or omissions of fact	aonatituto f	adaral arimina	violations	1500	18 H S C	1001\

		E. STATE SIGNATURE							
1.		presently subject to any of the disqualification provisions of such Yes No	-						
	See Appendi	ix, Column 5, for state response.							
2.	The undersigned issuer hereby undertakes t (17 CFR 239.500) at such times as required	o furnish to any state administrator of any state in which this notice is filed, a notice on Form I by state law.	D						
3.	<ol> <li>The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.</li> </ol>								
4.	4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.								
	e issuer has read this notification and knows dersigned duly authorized person.	the contents to be true and has duly caused this notice to be signed on its behalf by the							
lss	uer (Print or Type)	Signature Date							
Ţ۷	VM Floating Rate Fund, L.P.	January 11, 2007							
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)	•						
Sai	Samuel C. Perry Controller and Assistant Secretary of TTG GP Management, Inc., General Partner								

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

## APPENDIX

1	,	2	3 .	<u> </u>	4					
	non-acc investor (Par	o sell to credited s in State rt B- n 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No.	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount			
AL	103		111010313	1117031013	711104111	in vesters	, tinount			
/ AK		<b>-</b>								
AZ		<b></b>				<del> </del>				
AR			•							
CA					<del></del>					
СО							<del> </del>			
СТ										
DE				······································						
DC										
FL					· .		-			
GA					•					
HI										
GI						_				
1L										
IN										
ĪA .										
KS								·		
кү										
LA										
ME										
MD										
MA										
МІ	ļ									
MN						· ·				
MS	ļ									
МО						<u> </u> .				
MT								<u>[</u>		

## APPENDIX

1	2 3				5					
,	non-action investori (Pai	to sell to credited s in State rt B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item I)	Туре	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount			
NE										
NV	<u> </u>					<u> </u>				
NH						<u> </u>	<u> </u>	-		
NJ										
NM										
NY						<del>                                     </del>				
NC						<u> </u>				
ND										
ОН				<u> </u>						
ок						<del> </del>		<u> </u>		
OR				***	·			· · · · · · · · · · · · · · · · · · ·		
PA										
RI										
sc										
SD										
TN								,		
тх		No	Limited Partnership Interests \$4,890,515.48	9	\$4,890,515.48	0	\$0	No		
UT								•		
VT		No	Limited Partnership Interests \$120,000.00	1	\$120,000.00	0	\$0	No		
VA			·							
WA										
wv							•			
WI										
WY										

### APPENDIX

1		2	3		5			
	non-acc investors (Par	o sell to credited s in State rt B- m 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Туре	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	
PR				•	•			